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CONFIRMATION NO. 4854

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**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a 371 of PCT/EP03/50377 08/13/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
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**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 02/21/2006**

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> SPAIN <b>SHEETS DRAWING</b> 0 <b>TOTAL CLAIMS</b> 16 <b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>	

**ADDRESS**  
 27777

**TITLE**  
 Fused heterocyclic isoxazoline derivatives and their use as anti-depressants

<b>FILING FEE RECEIVED</b> 500	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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